prevention of goitre and other diseases arising from lack of iodine, as an essential ingredient for human nutrition, the small producers of salt have not been thrown out of employment. In fact, iodisation of salt has created additional employment for the workers.

(b) Does not arise.

(c) Does not arise.

Condition of Delhi Hospitals

2668. SHRI P. PRABHAKAR REDDY: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether it is a fact that racently he made some unannounced visits to some of the Government hospitals in Delhi;

(b) if so, the condition in which he found these hospitals in regard to cleanliness, maintenance of buildings and equipment availability of drugs and the patient care by the doctors and nurses; and

(c) what steps are proposed to be taken to tone up the deteriorating standards of the hospital services?

THE MINISTER OF STATE OF THE MINISTRY OF HEALTH AND FAMILY WELFARE (SHRI DALIT EZHILMALAI): (a) Yes, Sir. Hon'ble Minister visited Safdarjang Hospital.

(b) he found certain dificiencies in the Hospital.

(c) Corrective steps taken by the Medical Superintendent, Safdarjung Hospital include:—

(1) Barbed wire in front of Casuality is being replaced with an Iron Grill;

(2) Condemnation of Unserviceable items/vehicles is in process;

(3) Construction of covered shed for parking Hospital Vehicles; in process;

(4) CPWD has been asked to clear all rubble, maintain all toilets, keep drainage lines clean, prevent collection of water from their plants, clear sewer blockages, remove all drooping telephone/electrical wires and fix them properly and proper maintenance of all taps/coolers/lights;

(5) NDMC has been asked to clear non-hazardous Hospital Waste daily;

(6) NDMC has been requested to restore full water supply;

(7) Trolleys have now been kept free for the use of patients.

(8) Steps are being taken for segregation of hospital waste and disposal of waste in incinerators;

In additonal strengthening of the existing Emergency and Casuality Services and setting up of an Arthoscopy and Sports Injury Clinic at the Hospital have been approved by Expenditure Finance Committee/Standing Finance Committee. Government have also approved the construction of O.P.D. Phase III (Right & Left Wing) during Ninth Five Year Plan;

130 posts of various categories have been sanctioned for Burns Ward to overcome the shortage of manpower.

Powers of Chief Nursing Officer in AIIMS

2669. SHRI C.O. POULOSE: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether the powers of Chief Nursing Officer and Chief of Centres in AIIMS have been clearly defined;

(b) if so, the details thereof;

(c) whether the powers are strictly followed; and

(d) the reasons for several posts of nurses lying vacant since last two years?

THE MINISTER OF STATE OF THE MINISTRY OF HEALTH AND FAMILY WELFARE (SHRI DALIT EZHILMALAI): (a) Yes, Sir.

(b) The Chiefs of Centres enjoy powers of the Director, AIIMS except statutory and disciplinary powers as delegated under Regulation 33 of AIIMS Regulations 1958. The Chiefs are

empowered to take all decisions in Day-to-day management of the Centres. The Chief Nursing Officer is the Cadre Controlling Officer for all Nursing personnel in the Institute. She is responsible for management of nursing care in the wards and operation theateres. She is empowered to deal with transfer and posting, ad-hoc appointments against leave vacancy in consultation with the Medical Superintendent.

(c) Yes, Sir.

(d) Non-availability of reserved candidates and resignations of nurses are the main reasons for several posts lying vacant.

Patent for Kala Azar

2670. SHRI K.R. MALKANI: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether it is a fact that an American firm holds patent on a new successful cure for Kala Azar as reported in the 'Pioneer', dated 1st June, 1998;

(b) whether the company is not proceeding with the production of this drug only because the demand will be mostly in Bihar where there is an "unprofitable" market; and

(c) whether Government plan to advise Upjohn Co. to produce the drug or sell the patent to India?

THE MINISTER OF STATE OF THE MINISTRY OF HEALTH AND FAMILY WELFARE (SHRI DALIT EZHILMALAI): (a) to (c) As per records available with the patent office, M/s. Upjohn Co. is not holding any Indian patent for cure of Kala Azar.

The drug, Aminosidine, as an antibiotic, was approved many years ago for treatment of infections, including amoebic infections. Its indication for Kala-Azar is relatively new and the drug in the injection form is claimed to be effective in cases of Kala-Azar which are no longer responsive and resistant to old anti Kala-Azar pentavalent compounds *viz* sodium stibogluconate.

With the introduction of newer powerful and relatively safer antibiotics, this antibiotic has now become obsolete, barring the fact that it may have potential for treatment of a new indication *viz* Kala-Azar. M/s. Pharmacia & Upjohn India have indicated that they could explore the possibility of introducing the drug in the Indian Market.

Circular to Enlist Unqualified Medical Practitioners

2671. SHRI R. MARGABANDU: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state whether Government are aware of the circular issued by the Central Government to all the State Governments, Union Territories to enlist unqualified medical practitioners having ten years' experience in a special register in order to save them from penal provision *i.e.* Section 15 of the Indian Medical Council Act, 1956?

THE MINISTER OF STATE OF THE MINISTRY OF HEALTH AND FAMILY WELFARE (SHRI DALIT EZHILMALAI): The State/UT Govt. were advised in November, 1972 to allow unqualified medical practitioners who were practising medicine for a period of not less than 10 years on a specified day to continue to practise modern medicine. But the State Govts. were asked not to permit them to pratise Surgery, O&G or radiation thereapy in any form and prescribe medicines included in Schedules G, H. and II of Drugs and Cosmetics Rules, 1945 and other dangerous drugs. The State/UT Govt. were also requested on 4.3.78 to consider the question of making suitable provisions in the State Acts for enlistment of all unqualified medical practitioners in State Medical Register with prescribed qualifications and experience as on date to be specified by the State Govt. The State/UT Govts.